Fill in this information to identify your c	ase:
United States Bankruptcy Court for the	:
Eastern District of Miss	souri
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Linda First name Jean Middle name Harness Last name Suffix (Sr., Jr, II, III)	First name Middle name Last name Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years Include your married or maiden	First name	First name
	names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or	xxx-xx- <u>2</u> <u>7</u> <u>1</u> <u>8</u>	xxx-xx
	federal Individual Taxpayer Identification number (ITIN)	OR 9xx-xx	OR 9 xx-xx

Deb	tor 1 Linda	Jean H	larness		Ca	se number (if known))	
	First Name	Middle Name	Last Name	_		,	,	
		About Debtor 1:			About Deb	tor 2 (Spouse Only	in a Joint C	ase):
4.	Any business names and Employer Identification Numbers (EIN) you have used	ver Identification rs (EIN) you have used			☐I have not used any business names or EINs.			
	in the last 8 years Include trade names and doing business as names	Business name			Business na	ame		
		Business name			Business na	ame		
		EIN					- — —	_
		 EIN			 EIN			_
5.	Where you live				If Debtor 2	lives at a different a	address:	
		Number Street			Number	Street		
		Maryland Heights, MC	0 63043-1127					
		City	State	ZIP Code	City		State	ZIP Code
		St. Louis County County			County			
		If your mailing address it in here. Note that the other this mailing address.				's mailing address is te that the court will s dress.		
		Number Street			Number	Street		
		P.O. Box			P.O. Box			
		City	State	ZIP Code	City		State	ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: ☑ Over the last 180 da	avs before filing this p	etition. I have	Check one.	ne last 180 days befo	ore filina this	petition. I have
		lived in this district l	onger than in any oth	ner district.	lived in	this district longer that another reason. Expla	nan in any o	ther district.
		(See 28 U.S.C. § 14			(See 2	8 U.S.C. § 1408)	aii i.	

Linda

Jean

Harness

Harness Debtor 1 Linda Jean Case number (if known) ____ First Name Middle Name Last Name Tell the Court About Your Bankruptcy Case Part 2: The chapter of the Bankruptcy Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Code you are choosing to file (Form 2010)). Also, go to the top of page 1 and check the appropriate box. under Chapter 7 Chapter 11 Chapter 12 Chapter 13 ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details How you will pay the fee about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for bankruptcy ☐ No. within the last 8 years? Yes. District Eastern District of Missouri When 11/01/2020 Case number 20-45153 MM / DD / YYYY Case number When ____ MM / DD / YYYY District _____ Case number MM / DD / YYYY **√**No. 10. Are any bankruptcy cases pending or being filed by a ☐ Yes. Debtor ______ Relationship to you _____ spouse who is not filing this case with you, or by a business District _____ When ____ Case number, if known partner, or by an affiliate? MM / DD / YYYY Debtor _____ Relationship to you _____ When Case number, if known _____ MM / DD / YYYY No. Go to line 12. 11. Do you rent your residence? ☐ Yes. Has your landlord obtained an eviction judgment against you?

of this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part

Debt	or 1 Linda	J	ean	Harness			Case number (if known)	
	First Name	• N	/liddle Na	me Last Name				
Par	t 3: Report About A	ny Busines	sses Yo	ou Own as a Sole Pro	oprietor			
12.	Are you a sole propriet	or of anv	√ 1 No. G	So to Part 4.				
	full- or part-time business?		_	Name and location of busin	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.							
			Name	of business, if any				
	If you have more than one proprietorship, use a sepa sheet and attach it to this	arate	Numb	er Street				
			0:4				710.0-1-	
			City			State	ZIP Code	
			_	k the appropriate box to d	•			
			_	lealth Care Business (as o		- , ,,		
			_	Single Asset Real Estate (a		- , ,)	
			_	Stockbroker (as defined in 1	- ,	,,		
			_	Commodity Broker (as defin	ned in 11 U.S.C.	§ 101(6))		
			□ N	lone of the above				
13.	Are you filing under Ch of the Bankruptcy Cod are you a small busines or a debtor as defined & U.S. C. § 1182(1)? For a definition of small b debtor, see 11 U.S.C. § 1	e, and uses debtor of the py 11 second secon	inder Sulthoosing tratement No. No. Yes.	ochapter V so that it can see to proceed under Subchape, and federal income tax re I am not filing under Clap Bankruptcy Code. I am filing under Chap Code, and I do not cho I am filing under Chap and I choose to procee	et appropriate dea oter V, you must a sturn or if any of th hapter 11. ter 11, but I am N ter 11, I am a sm ose to proceed u ter 11, I am a del ed under Subchap	adlines. If you indictach your most referse documents described as small busined all business debtorneder Subchapter Votor according to the other V of Chapter 1	ne definition in § 1182(1) of the	ess debtor or you are of operations, cash-flow e in 11 U.S.C. § 1116(1)(B). finition in the he Bankruptcy Bankruptcy Code,
гаі	r 4. Report II Tod O			lazardous Froperty	of Ally Prope	erty mat Need	us illillediate Atterition	1
14.	Do you own or have an property that poses or	j ie	✓ No.					
	alleged to pose a threa imminent and identifial	t of	Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention is r	needed, why is it	needed?		
	For example, do you own perishable goods, or lives must be fed, or a building needs urgent repairs?	stock that		Where is the property?	Number S	treet		
					City		State	ZIP Code

Harness Linda Jean Case number (if known) _ First Name Middle Name Last Name

Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if anv.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the

internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	First Name	iviidale	name Last Name				
Par	t 6: Answer These Questions	for F	eporting Purposes				
16.	What kind of debts do you have?	16a.	 Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. ✓ Yes. Go to line 17. 				
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.				
		16c.	State the type of debts you owe	that a	are not consumer debts or business	s debts.	
17.	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	1	· ·				
18.	How many creditors do you estimate that you owe?	V	1-49				
19.	How much do you estimate your assets to be worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much do you estimate your liabilities to be? t 7: Sign Below		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	J						
For	For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
					perty, or obtaining money or property up to 20 years, or both. 18 U.S.C. §		d in connection with a bankruptcy case 41, 1519, and 3571.
	X <u>/s</u>	/ Linda	Jean Harness				
			Harness, Debtor 1				
	Executed on 04/12/2021 MM/ DD/ YYYY						

Harness

Case number (if known)

Debtor 1

Linda

Debtor 1	Linda	Jean	Harness	Case number (if known).	
	First Name	Middle Name	Last Name	,	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Douglas Heagler	Date <u>04/12/2021</u>
Signature of Attorney for Debtor	MM / DD / YYYY
Douglas Heagler	
Printed name	
Heagler Law Firm	
Firm name	
901 Boones Lick 100	
Number Street	
Saint Charles	MO 63301
City	State ZIP Code
Contact phone (636) 278-2778	Email address <u>dheagler@freshstartbk.com</u>
Someon priorito (1999) ETO ETTO	
48952	MO
Bar number	State

Fill in this information to identify your case and this filing:									
Debtor 1	Linda	Jean	Harness						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankru	uptcy Court for the:	E	astern District of Missouri						
Case number									

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Describe Each Residence, Building	, Land, or Other Real Estate You Own or H	ave an Interest In		
1.	۱	rou own or have any legal or equitable interes No. Go to Part 2. Yes. Where is the property? 12011 Bennington Place Street address, if available, or other description	t in any residence, building, land, or similar property? What is the property? Check all that apply. Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Maryland Heights, MO 63043-1127 City State ZIP Code	□ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Current value of the entire property? \$118,500.00	Current value of the portion you own? \$118,500.00 ur ownership interest (such	
		County		estate), if known. Fee Simple Check if this is comme (see instructions)	· 	
2.			I of your entries from Part 1, including any entries for		\$118,500.00	

Debtor 1	Linda First Name	Jean Middle Name	Harness Last Name	Case number (if known)		
Part 2	: Describe Your Vel	hicles				
you own 3. Car	s, vans, trucks, tractors,	. If you lease a vehicle,	Who has an interest in the property? Check one. ✓ Debtor 1 only	d Unexpired Leases. Do not deduct secured cla	ims or exemptions. Put the ims on Schedule D: Creditors	
	Year: Approximate mileage: Other information:	2007 22000	 □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) 	Current value of the entire property? \$3,900.00	Current value of the portion you own?\$3,900.00	
-	wown or have more than one, list here: Make: Suzuki Model: Year: Approximate mileage: Other information:	Suzuki Vitara Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another mileage: □ Check if this is community property (see		Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creat Who Have Claims Secured by Property.</i> Current value of the entire property? \$1,000.00 \$1,000.00		
5. Ad	amples: Boats, trailers, mo No Yes d the dollar value of the	homes, ATVs and oth otors, personal watercon portion you own for a	instructions) er recreational vehicles, other vehicles, and access raft, fishing vessels, snowmobiles, motorcycle accessed all of your entries from Part 2, including any entries nere	ories for pages	→ \$4,900.00	
Part 3			hold Items n any of the following items?		Current value of the portion you own? Do not deduct secured dains or exemptions	

Debtor 1 Linda **Harness** Case number (if known) _ First Name Middle Name Last Name 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No ☐ Yes. Describe....... miscellaneous household goods and furnishings \$450.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No miscellaneous household electronics \$200.00 Yes. Describe...... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No ☐ Yes. Describe...... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe...... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No .22 rifle and pistol Yes. Describe...... \$200.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Nο wearing apparel \$200.00 Yes. Describe...... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver costume jewelry Yes. Describe...... \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No 1 dog, 3 dragon lizards and 2 geckos \$100.00 Yes. Describe......

Debt	tor 1	Linda	Jean	Harness		Case number (if known))
		First Name	Middle Name	Last Name		,	
14.	Any other per No Yes. Des	First Name ersonal and house cribe	Middle Name chold items you did not our entries from Part 3		ealth aids you did not lis	t	\$1,300.00
Par	t 4: Descr	ibe Your Finan	cial Assets				
Do	you own or h	ave any legal or e	quitable interest in any	of the following?			Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	No No			e, in a safe deposit box, and on			<u>\$125.00</u>
17.		Checking, savings similar institutions.		unts; certificates of deposit; sh counts with the same institution		cerage houses, and othe	er
	17.1. Checkii	ng account:	Chime			\$585.00	
	17.2. Checkii	ng account:					
	17.3. Savings	s account:					
	17.4. Savings	s account:		_			
	17.5. Certific	ates of deposit:					
	17.6. Other fi	inancial account:					
		inancial account:					
		nancial account:					
	17.9. Other fi	inancial account:					

Debte	or 1	Linda	Jean	Harness	Case number (if known)		
		First Name	Middle Name	Last Name			
18.			y traded stocks ent accounts with brokerag	ge firms, money mark	et accounts		
19.		/ traded stock and in		and unincorporated	I businesses, including an interest in		
	No Yes. Give information them	on about		c	6 of ownership:		
20.	Negotiable in	struments include pe ole instruments are the especific on about	nds and other negotiable rsonal checks, cashiers' cl ose you cannot transfer to	hecks, promissory no	tes, and money orders.		
21.	Examples:	each account y.		o), thrift savings acco	unts, or other pension or profit-sharing plans		
	Pension plan		ble claim on pension of	f ex-spouse	unknown_		
22.							
	Yes		nme or individual:				
	Electric:						
	Gas:						

Debt	or 1	Linda	Jean	Harness	Case nur	nber (if known)
		First Name	Middle Name	Last Name		
	Llooting oil.					
	Heating oil:					
	Security depos	sit on rental unit: .				
	Duan aid namb					
	Prepaid rent:					
	Telephone:					
	reiepriorie.					
	Water:					
	Rented furnitu	re:				
	Other:					
23.	Annuities (A	contract for a perio	dic payment of money to	you, either for life or for a nun	nber of vears)	
				, , , , , , , , , , , , , , , , , , , ,		
	√ No					
	☐ Yes					
	laguer name a	and decorretions				
	issuer name a	and description:				
24.	Interests in ar	n education IRA,	in an account in a qua	lified ABLE program, or unde	er a qualified state tuition progra	m.
		530(b)(1), 529A(b)		. •		
		550(b)(1), 525A(b)), and 525(b)(1).			
	☑ No					
	☐ Yes					
	la atituti a a a a a		Cananatalı dia tha nasa		S 504(-).	
	institution nam	ne and description.	. Separately file the reco	rds of any interests. 11 U.S.C.	§ 521(c):	
25.	Trusts, equita	able or future inte	rests in property (other	than anything listed in line), and rights or powers exercisa	ble for your
	benefit			, 0	,, , , , , , , , , , , , , , , , , , , ,	•
	√ No					
	Yes. Give	specific				
	information	n about them				
	5.4.4					
26.		_		ther intellectual property		
	Examples: Ir	nternet domain na	mes, websites, proceed	s from royalties and licensing a	greements	
	√ No					
	Yes. Give	on o cific				
		specific n about them				
	IIIIOIIIIalioi	rabout trieffi				
27.	Licenses, fran	nchises, and othe	er general intangibles			
				protive accomination holdings. li	yuar ligangaa	
				erative association holdings, li	quoi iicerises,	
		rofessional licens	C 3			
	√ No					
	☐ Yes. Give	specific				
		about them				

Linda

Jean

Harness

Debt	or 1	<u>Linda</u> J	ean	Harness	Case number (if known)	
		First Name N	Middle Name	Last Name		
Mon	ey or property	owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	ther alre	e specific information about m, including whether you ady filed the returns and the specific states are specified.			Federal: State: Local:	
29.	☑ No			, child support, maintenance,	Alimony: Maintenance: Support: Divorce settlement: Property settlement	
30.	Examples: √ No	nts someone owes you Unpaid wages, disability i Security benefits; unpaid l e specific information	loans you made to son		cation pay, workers' compensation, Social	
31.	Examples: ✓ No ☐ Yes. Nar	nsurance policies Health, disability, or life in the insurance compan ach policy and list its value	y Componin		neowner's, or renter's insurance Beneficiary:	Surrender or refund value:
32.	If you are the because som	in property that is due y beneficiary of a living true eone has died. e specific information	st, expect proceeds fro		are currently entitled to receive property	

Debt	or 1	Linda	Jean	Harness	Case number (if known)	
		First Name	Middle Name	Last Name		
33.	Claime again	et third partice wh	other or not you have	filed a lawsuit or made a demand	1 for navment	
55.					Tor payment	
	Examples: A	Accidents, employn	nent disputes, insurand	e claims, or rights to sue		
	√ No					
	☐ Yes. Des	cribe each claim				
34.	Other conting	gent and unliquida	ated claims of every r	ature, including counterclaims o	f the debtor and rights	
	to set off clai	ms				
	⊸ 6					
	☑ No					
	☐ Yes. Des	cribe each claim				
35.	Any financial	assets you did not	already list			
		-	-			
	√ No					
	Yes. Give	e specific information	n			
36.				, including any entries for pages y		
	for Part 4. Wi	rite that number h	ere		→ <u>\$7</u>	10.00
						_
Par	t 5: Descri	be Any Busine:	ss-Related Proper	ty You Own or Have an Int	erest In. List any real estate in Part 1.	
					·	
37.	-		r equitable interest in	any business-related property?		
	☑ No. Go to	Part 6.				
	Yes. Go to	line 38.				
					Current value of	f the
					portion you own	
					Do not deduct sec	
					claims or exempti	ions.
38.	Accounts rec	eivable or commis	sions you already ear	ned		
	√ No					
	Yes. Desc	ribo				
	ies. Desc	,iibe				
39.	Office equipr	nent, furnishings,	and supplies			
00.		_		de la companya de la	and the state of t	
	Examples: E	Business-related co	imputers, software, mo	dems, printers, copiers, rax machin	es, rugs, telephones, desks, chairs, electronic devices	
	√ No					
	Yes. Desc	cribe				
		_				
40	Machine : (duros en desercie	ounniles verres ! !	vuoinose and table of very two de-		
40.	iviacninery, fix	aures, equipment,	supplies you use in t	ousiness, and tools of your trade		
	√ No					
	Yes. Desc	rihe				
	163. D680	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

Debt	or 1	Linda	Jean	Harness	Case number (if known).	
		First Name	Middle Name	Last Name		
41.	Inventory					
	✓ No					
	Yes. Desc	ribe				
42.	Interests in p	artnerships or joi	int ventures			
	√ No					
	Yes. Desc	ribe				
	Name of entity	r.			% of ownership:	
	, , , , , , , , , , , , , , , , , , , ,				,	
					%	
43.	Customer list	te mailing liete o	r other compilations			
٠٠.	✓ No	is, maining lists, o	other compliations			
		our lists include p	ersonally identifiable info	rmation (as defir	ned in 11 U.S.C. § 101(41A))?	
	$\mathbf{\Delta}$					
		Yes. Describe				
44.	Any business	s-related property	you did not already list			
	√ No					
	Yes. Give					
	informatio	П				
45.					es for pages you have attached	40.00
	for Part 5. Wi	rite that number h	nere		 →	\$0.00
Par	t 6: Describ	oe Any Farm- a	nd Commercial Fishi	ng-Related Pr	operty You Own or Have an Interest In.	
		vn or have an inte	rest in farmland, list it in	Part 1.		
46.	-		or equitable interest in an	y farm- or comm	ercial fishing-related property?	
	✓No. Go to I	Part 7.				
	Yes. Go to	line 47.				
						Current value of the
						portion you own?
						Do not deduct secured claims or exemptions.
47.	Farm animals	•				
		ivestock, poultry, fa	arm-raised fish			
	, ✓ No	., ,,				
	☐ Yes					
48.	Crops—eithe	er growing or har	vested			
	√ No	_				
	Yes. Give			<u> </u>		
	informatio	II				

Debt	or 1	Linda	Jean	Harness	Case nur	mber (if known)	-
		First Name	Middle Name	Last Name			
49.	Farm and fisl	hing equipmen	t, implements, machinery, t	fixtures, and tools of trac	le		
	√ No						
	Yes						
		L					
50.	Farm and fisl	hing supplies, o	chemicals, and feed				
	✓ No ☐ Yes	Γ					
	res						
51.	Any farm- and	d commercial f	ishing-related property you	did not already list			
	√ No	_					
	Yes. Give information						
52.			your entries from Part 6, in		ages you have attached →	\$0.00	
	IOI Fait 0. W	inte that numbe	7 Nere			Ψ0.00	┙
D		la a All Duana	anti Mari Orina and Harri	latanatia That	Varia District I late Alance		
Par	t 7: Descri	be All Prope	erty you Own or Have	an interest in That	You Did Not List Above		_
53.	-		of any kind you did not alre	eady list?			
	Examples: \$	Season tickets, o	country club membership				
	Yes. Give	specific					
	informatio	n					
54.	Add the dolla	ar value of all o	f your entries from Part 7.	Write that number here	→	\$0.00	
Par	t 8: List th	e Totals of	Each Part of this Forr	n			_
55.	Part 1: Total	real estate, line	2		→	\$118,500.00	
56.	Part 2: Total	vehicles, line 5		¢	4,900.00		
50.	Tart 2. Total	vernicles, line 3		Ψ	1,300.00		
57.	Part 3: Total	personal and h	ousehold items, line 15	\$	1,300.00		
58.	Part 4: Total f	financial assets	s, line 36		\$710.00		
59.	Part 5: Total I	business-relate	ed property, line 45		\$0.00		
60.	Part 6: Total	farm- and fishi	ng-related property, line 52		\$0.00		
61.	Part 7: Total	other property	not listed, line 54	+	\$0.00		
	· arrival	and property		-	45.50		

Debt	or 1	Linda	Jean	Harness	Case number (if kn	own)
		First Name	Middle Name	Last Name	·	
62.	Total perso	nal property. Add l	ines 56 through 61	\$6,910.00	Copy personal property total →	+\$6,910.00
63.	Total of all p	property on Sched	lule A/B. Add line 55 + line 6	2		\$125,410.00

Debtor 1	Linda	Jean	Harness	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	ptcy Court for the:	E	astern District of Missouri	
Case number				
(if known)				

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Claim as	Exempt							
1.	✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
	of description of the property and line on edule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption					
120 630 Line	f description: 11 Bennington Place Maryland Heights, MO 143-1127 1 from 15 from 16 food and the second se	\$118,500.00	\$15,000.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.475					
200 Line	f description: 07 Nissan Frontier 05 from 06 edule A/B:	\$3,900.00	\$3,000.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(5)					
3.									

 Linda
 Jean
 Harness
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Check only one box for each exemption.		Specific laws that allow exemption
	Schedule A/B	Officer only one box for each exemption.	
Brief description:		√ \$0.00	Ma Day Chat S 542 420 4/5)
2003 Suzuki Vitara	\$1,000.00		Mo. Rev. Stat. § 513.430.1(5)
Daughter uses and maintains		☐ 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 3.2		, , ,	
Scriedule AVB. 3.2			
Brief description:		√ \$450.00	Mo. Rev. Stat. § 513.430.1(1)
miscellaneous household goods and furnishings	\$450.00	100% of fair market value, up to	
Line from		any applicable statutory limit	
Schedule A/B: 6			
Brief description:		√ \$200.00	Mo. Rev. Stat. § 513.430.1(1)
miscellaneous household electronics	\$200.00	100% of fair market value, up to	
Line from		any applicable statutory limit	
Schedule A/B: 7			
Brief description:		\$200.00	Mo. Rev. Stat. § 513.430.1(12)
.22 rifle and pistol	\$200.00	100% of fair market value, up to	
Line from		any applicable statutory limit	
Schedule A/B: 10			
Brief description:		\$200.00	Mo. Rev. Stat. § 513.430.1(1)
wearing apparel	\$200.00	100% of fair market value, up to	100. Nev. Otal. § 313.450.1(1)
Line from		any applicable statutory limit	
Schedule A/B: 11			
Brief description:		☑ \$150.00	Mo. Rev. Stat. § 513.430.1(2)
costume jewelry	\$150.00	100% of fair market value, up to	IVIO. Rev. Stat. 9 515.450.1(2)
Line from		any applicable statutory limit	
Schedule A/B: 12		·	
Brief description:		√ unknown	Ma Day Chat S 542 420 4/40\/0
possible claim on pension of ex-spouse	unknown		Mo. Rev. Stat. § 513.430.1(10)(f)
Line from		■ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: 21		•	

Fill ir	n this information to	identify your case:					
Del	otor 1	Linda	Jean	Harness			
		First Name	Middle Name	Last Name			
	otor 2						
(Sp	ouse, if filing)	First Name	Middle Name	Last Name			
Uni	ted States Bankrup	tcy Court for the:	E	Eastern District of Missouri			
Cas	se number					☐ Check if t	his is an
	nown)					amended	filing
Off	icial Form	106D					
			. \ \ / /	la	-l l D		
SC	neaule D	: Creditors	s wno F	lave Claims Secure	a by Prope	erty	12/15
	ed, copy the Addit			ole are filing together, both are equally reses, and attach it to this form. On the top of			
	,	claims secured by yo	ur property?				
	No. Check this box	k and submit this form to	the court with y	our other schedules. You have nothing else	to report on this form.		
_	,	e information below.	,	5	·		
_							
Par	t 1: List All Se	ecured Claims					
	each claim. If more		a particular claim	cured claim, list the creditor separately for n, list the other creditors in Part 2. As much to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Select Portfolio Se	ervicing, Inc	Describe t	the property that secures the claim:	\$85,907.00	\$118,500.00	\$0.00
	Creditor's Name			ennington Place Maryland Heights, MO			-
	Attn: Bankruptcy		63043-11	, ,			
,	PO Box 65250		As of the d	ate you file, the claim is: Check all that apply.			

Number

Debtor 2 only

City

Street

State

ZIP Code

Salt Lake City, UT 84165-0250

Who owes the debt? Check one. Debtor 1 only

☐ Check if this claim relates to a

At least one of the debtors and another

Debtor 1 and Debtor 2 only

community debt

Date debt was incurred

2/1/2004

□ Contingent

Disputed

Add the dollar value of your entries in Column A on this page. Write that number here:

Unliquidated

Nature of lien. Check all that apply.

☐ Judgment lien from a lawsuit

Other (including a right to offset)

secured car loan)

☐ An agreement you made (such as mortgage or

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number 0 7 2 6

\$85,907.00

Debtor 1 Linda Jean **Harness** Case number (if known). First Name Middle Name Last Name Column A Column B Column C Additional Page Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with that supports portion Do not deduct the 2.3, followed by 2.4, and so forth. this claim value of collateral. If any 2.2 Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. ☐ Contingent City State ZIP Code Unliquidated Who owes the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Nature of lien. Check all that apply. Debtor 1 and Debtor 2 only ☐ An agreement you made (such as mortgage or secured car loan) At least one of the debtors and another Statutory lien (such as tax lien, mechanic's lien) Check if this claim relates to a ☐ Judgment lien from a lawsuit community debt Other (including a right to offset) Date debt was incurred Last 4 digits of account number ___ __ __ Add the dollar value of your entries in Column A on this page. Write that number here: \$0.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number \$85,907.00

here:

Fill in this information	to identify your case:						
Debtor 1	Linda	Jean	Harness				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankr	uptcy Court for the:	E	astern District of Missouri				
Case number						Check if this	is an
(if known)					_	amended fili	
Official Form	1065/5			_			
		1 - · · · \ \ \ / / / · · ·					
Schedule	E/F: Credi	tors Who	Have Unsecured Cl	aims			12/15
1. Do any creditors No. Go to Pa	of Your PRIORIT's have priority unsec						
☑ Yes.							
identify what type possible, list the of Part 1. If more th	e of claim it is. If a clair claims in alphabetical an one creditor holds	n has both priority an order according to th a particular claim, lis	more than one priority unsecured claim, lis d nonpriority amounts, list that claim here ar e creditor's name. If you have more than tw the other creditors in Part 3. ns for this form in the instruction booklet.)	nd show both priority and	d nonprior	ity amounts.	As much as
				Total claim		iority nount	Nonpriority amount
2.1 Heagler Law	C:um			\$1	,000.00	\$1,000.00	\$0.00
2.1 Heagler Law Priority Creditor			Last 4 digits of account number				
901 Boones I	Lick 100		When was the debt incurred?				
	Street		As of the date you file, the claim is: Che apply.	ck all that			
Saint Charles	,		Contingent				
City	State	zIP Code	☐ Unliquidated				
,	the debt? Check on	e.	Disputed				
Debtor 1 c	-		Type of PRIORITY unsecured claim:				
Debtor 2 o	•		Domestic support obligations				
_	and Debtor 2 only	nother	☐ Taxes and certain other debts you ow	e the			

government

Other. Specify
Attorney Fees

Claims for death or personal injury while you were intoxicated

Is the claim subject to offset?

☑ No ☐ Yes

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

indire indire	Louis	
Part 2: List All of Your NONPRIORITY Unsecured	d Claims	
3. Do any creditors have nonpriority unsecured claims again	nst you?	
	orm to the court with your other schedules.	
✓ Yes.		
unsecured claim, list the creditor separately for each claim. F	betical order of the creditor who holds each claim. If a creditor has more than For each claim listed, identify what type of claim it is. Do not list claims already in tors in Part 3. If you have more than three nonpriority unsecured claims fill out the	ncluded in Part 1. If more
		Total claim
4.1 Ameren UE	Last 4 digits of account number	\$117.00
Nonpriority Creditor's Name	G	
Attn: Bankruptcy	When was the debt incurred?	
Po Box 66881	As of the date you file, the claim is: Check all that apply.	
Number Street	────	
Saint Louis, MO 63166-6881 City State ZIP Code	Disputed	
•	·	
Who incurred the debt? Check one. ✓ Debtor 1 only	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify utility	
☑ No	utility	
☐ Yes		
4.2 Comenity Bank/Avenue	Last 4 digits of account number 7225	\$0.00
Nonpriority Creditor's Name		
Attn: Bankruptcy	When was the debt incurred? 12/01/2007	
PO Box 182125	As of the date you file, the claim is: Check all that apply. Contingent	
Number Street	Unliquidated	
Columbus, OH 43218	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts ① Other. Specify	
Is the claim subject to offset?	ChargeAccount	
☑ No	·	
☐ Yes		
4.3 Credence Resource Management, LLC	Last 4 digits of account number 3961	\$776.00
Nonpriority Creditor's Name	When was the debt incurred? 05/01/2020	
17000 Dallas Parkway Suite 204	As of the date you file, the claim is: Check all that apply.	
Number Street	☐ Contingent	
Dallas, TX 75248 City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	Disputed	
who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	Other. Specify	
☑ No	CollectionAttorney	
☐ Yes		

Linda

Jean

Harness

Case number (if known)

Debtor 1 Linda Jean Harness Case number (if known) _______

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

er listing any entries on this page, number them beginning v	vith 4.5, followed by 4.6, and so forth.	Total claim
Spire Nonpriority Creditor's Name 700 Market Street Number Street Saint Louis, MO 63103 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify utility	\$120.00
US Bank/RMS CC Nonpriority Creditor's Name Attn: Bankruptcy PO Box 5229 Number Street Cincinnati, OH 45201-5229 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 3138 When was the debt incurred? 01/01/2008 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard	\$16,798.00

Linda Jean Harness Case number (if known) _ First Name

Middle Name

Last Name

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$1,000.00
	6e. Total. Add lines 6a through 6d.	6e.	\$1,000.00
			Total claim
Total claims			
Total claims from Part 2	6f. Student loans	6f.	\$0.00
nomi urt 2	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	\$0.00 \$0.00
iioiii art	6g. Obligations arising out of a separation agreement or divorce that you did not report as		
iioiiii atz	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and 	6g. 6h.	\$0.00

Debtor 1 Linda Jean Harness First Name Middle Name Last Name Debtor 2	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Eastern District of Missouri	
Case number	☐ Check if th
(if known)	amended f

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom you have	e the contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

Fill	in this information to	identify your case	:					
D	ebtor 1	Linda	Jean	Harness				
		First Name	Middle Name	Last Name				
	ebtor 2 spouse, if filing)	First Name	Middle Name	Last Name				
U	nited States Bankrup	otcy Court for the:	Ea	stern District of Missour	i			
_	ase number _ known)						Check if this is an amended filing	
Of	ficial Form	106H						
Sc	chedule H	l: Your C	odebtors				1	12/15
	Do you have any No Yes Within the last 8 Louisiana, Nevac	years, have you li la, New Mexico, Pu 3.	ved in a community parto Rico, Texas, Was	any Additional Pages, wri	te your name and as a codebtor.) ? (Community prop	nal Page, fill it out, and num case number (if known). Ans erty states and territories inclu	swer every question.	
	Yes. In whi	ich community state	e or territory did you live	e?	Fill ir	the name and current address	s of that person.	
	Name 							
	Number	Street						
	City		State ZIP Code	9				
3.	codebtor only if	that person is a g	uarantor or cosigner.	•	ed the creditor on	filing with you. List the pers Schedule D (Official Form 10 o fill out Column 2.		
	Column 1: Your co	debtor				umn 2: The creditor to whom heck all schedules that apply:	you owe the debt	
3.1						Schedule D, line		
	Name					Schedule E/F, line		

Number

City

Street

State

ZIP Code

Schedule G, line

							_					
Fill	in this information to i	dentify your case	:									
D	ebtor 1	Linda	Jean Har	ness								
		First Name	Middle Name Last	Name								
_	ebtor 2 pouse, if filing)	First Name	Middle Name Last	Name					Chack	if this is:		
•	nited States Bankrupto			District of Misso	uri				_	amended fil	ing	
		by Court for the.	Lasterni	JISTI ICT OF WIISSO	un				_	upplement s	Ü	stpetition
_	ase number known)								cha	pter 13 inco	me as of th	ne following date
									MM	/ DD / YY	ΥY	
∩f	ficial Form ²	1061										
Sc	chedule I:	Your Ind	come									12/15
addi Pa		our name and ca	ude information about your s se number (if known). Answe			o is necess	, utuon a se		Silverto	, uno 161111.		o or unity
•	information.			Debtor 1					Debt	or 2 or nor	n-filing spe	ouse
	If you have more than attach a separate pag		Employment status	✓ Employed □	□No	t Employed			☐ Emplo	yed 🗆 Not	Employed	
	information about add employers.	ditional	Occupation	Associate								
	Include part time, sea	asonal, or	Employer's name	Wal-Mart								
	self-employed work.		Employer's address	11900 St Charl	es R	ock Rd						
	Occupation may inclu or homemaker, if it as			Number Street				_	Number	Street		
	or nomemaker, in it ap	pplics.										
				Bridgeton, MO	630	1.4						
				City	000-	State	Zip Code		City		State	Zip Code
			How long employed there?	1 year 3 months	5	_						
Pa	rt 2: Give Detai	ls About Mon	thly Income									
	Estimate monthly in are separated.	come as of the	date you file this form. If you	have nothing to	epor	t for any line	, write \$0 in t	he spa	ice. Includ	e your non-	filing spous	se unless you
	If you or your non-filin attach a separate she		nore than one employer, combi	ine the informatio	n for	all employer	s for that per	son on	the lines	below. If yo	u need mo	re space,
						For	Debtor 1		or Debtor on-filing s			
2.			d commissions (before all pa ate what the monthly wage wo		2.	;	\$1,787.50	_		\$0.00		
3.	Estimate and list mo	onthly overtime	pay.		3.	+	\$0.00	+		\$0.00		
		• • • • • • • • • • • • • • • • • • • •	•				ΨΟ.ΟΟ	 		ψυ.υυ	7	

4. Calculate gross income. Add line 2 + line 3.

\$1,787.50

 Linda
 Jean
 Harness
 Case number (if known)

 First Name
 Middle Name
 Last Name

	i iist ivaille ivilique ivaille Last ivaille			
			For Debtor 1	For Debtor 2 or non-filing spouse
	Copy line 4 here→	4.	\$1,787.50	\$0.00
5.	List all payroll deductions:			
	5a. Tax, Medicare, and Social Security deductions	5a.	\$230.84	\$0.00
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
	5e. Insurance	5e.	\$0.00	<u>\$0.00</u>
	5f. Domestic support obligations	5f.	\$0.00	\$0.00
	5g. Union dues	5g.	\$0.00	<u>\$0.00</u>
	5h. Other deductions. Specify:	5h	+ \$0.00	+ \$0.00
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$230.84	\$0.00
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$1,556.66	\$0.00
8.	List all other income regularly received:			
	8a. Net income from rental property and from operating a business, profession, or farm			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00
	8b. Interest and dividends	8b.	\$0.00	\$0.00
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00
	8d. Unemployment compensation	8d.	\$0.00	\$0.00
	8e. Social Security	8e.	\$479.00	\$0.00
	8f. Other government assistance that you regularly receive			
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
	Specify:	8f.	\$0.00	<u>\$0.00</u>
	8g. Pension or retirement income	8g.	\$0.00	\$0.00
	8h. Other monthly income. Specify: Part time baby sitting	8h	+ \$180.00	+\$0.00
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$659.00	\$0.00
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,215.66	\$0.00 = \$2,215.66
11.	State all other regular contributions to the expenses that you list in Schedule .	J.		
	Include contributions from an unmarried partner, members of your household, your of friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not a	•		
	Specify:			11. + \$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The result amount on the Summary of Your Assets and Liabilities and Certain Statistical Inform		•	
				Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this form?			
	□ No. in the next 9 to 12 months I expect to start receiving a widows pe	ension fro	m the Bakers Union.	
	✓ Yes. Explain:		-	

Fi	ll in this information to	identify your case:					
Е	Debtor 1	Linda	Jean	Harness			
		First Name	Middle Name	Last Name		eck if this is:	
_	Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		An amended filing	
,						A supplement showing phapter 13 income as o	
	Jnited States Bankrup	icy Court for the.		astern District o			
	Case number if known)				ľ	MM / DD / YYYY	
0	fficial Form	<u>106J</u>					
S	chedule J	: Your Ex	penses				12/15
					ther, both are equally responsible		
nee	eded, attach another	sheet to this form.	On the top of any a	dditional pages,	write your name and case number	er (if known). Answer	every question.
Pa	art 1: Describe	Your Household					
1.	Is this a joint case	?					
	☑No. Go to line 2.						
		or 2 live in a separa	ate household?				
	□No						
				Expenses for Sep	arate Household of Debtor 2.		
2.	Do you have depe Do not list Debtor 1		₩No		Dependent's relationship to	Dependent's	Does dependent live
	Debtor 2.	and	Yes. Fill out this each dependen		Debtor 1 or Debtor 2	age	with you?
	Do not state the dep	pendents' names.	00011 0000110011				No. Yes.
							- □No. □Yes.
							No. Yes.
						_	No. ☐Yes.
							No. Yes.
3.	Do your expenses of people other that		✓No				
	your dependents?	•	Yes				
Р	art 2: Estimate	Your Ongoing N	Monthly Expense	es			
		•		-	ng this form as a supplement in a the top of the form and fill in the		port expenses as of a date after
	clude expenses paid					You	ır expenses
SU	ıch assistance and h	nave included it on	Schedule I: Your In	come (Official Fo	orm 106l.)		T
4.	The rental or home ground or lot.	e ownership expens	ses for your residen	ce. Include first m	nortgage payments and any rent for	the 4.	\$900.00
	g. 2 a 5ou						
	If not included in I	ine 4:					
	4a. Real estate taxe	es				4a	\$0.00
	4b. Property, home	owner's, or renter's i	nsurance			4b	\$0.00
	4c Home maintena	nce, repair, and upke	een expenses			4c.	\$125.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

Debtor 1 Linda Jean Harness Case number (if known) ______

First Name Middle Name Last Name

	You	expenses
Additional mortgage payments for your residence, such as home equity loans	5	\$0.00
Utilities:		
6a. Electricity, heat, natural gas	6a	\$155.00
6b. Water, sewer, garbage collection	6b	\$78.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$0.00
6d. Other. Specify:	6d	\$0.00
Food and housekeeping supplies	7.	\$310.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$30.00
Personal care products and services	10.	\$35.00
Medical and dental expenses	11	\$40.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$260.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$30.00
4. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. ——	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$83.00
15d. Other insurance. Specify:	15d	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c.	\$0.00
17d. Other. Specify:	17d	\$0.00
3. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes		\$0.00
20c. Property, homeowner's, or renter's insurance	· · · · · · · · · · · · · · · · · · ·	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1 Linda Jean **Harness** Case number (if known) First Name Middle Name Last Name animal care 21. Other. Specify: 21. \$40.00 22. Calculate your monthly expenses. 22a. \$2,086.00 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. \$2,086.00 22c. 23. Calculate your monthly net income. 23a. \$2,215.66 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$2,086.00 23c. Subtract your monthly expenses from your monthly income. \$129.66 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **√**No. None ☐ Yes.

Fill in this information	to identify your case:			
Debtor 1	Linda	Jean	Harness	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Eastern District of Missouri		
Case number (if known)				

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct i schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you and check the box at the top of this page.	_
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$118,500.00 \$6,910.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$125,410.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$85,907.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$1,000.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$17,811.00
Part 3: Summarize Your Income and Expenses	\$104,718.00
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,215.66
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,086.00

Debtor 1 Linda Jean Harness			Case number (if known))		
	First Name Middle Name Last Name							
Ра	rt 4: Answe	er These Ques	tions for Administ	rative and Statistical Reco	ords			
	_		er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this form	n to the court \	with yo	our other schedules.	
5	Your debts family, or ho Your debts	usehold purpose."	sumer debts. Consume 11 U.S.C. § 101(8). Fill consumer debts. You h	r debts are those "incurred by an incourred by an incourt lines 8-9g for statistical purpos ave nothing to report on this part of	es. 28 U.S.C.	§ 159).	
			rent Monthly Income: 0 2B Line 11; OR, Form 1	Copy your total current monthly inco 22C-1 Line 14.	ome from Offic	cial		\$396.67
9. C	copy the follow	ving special catego	ories of claims from Pa	rt 4, line 6 of Schedule E/F:		T	otal claim	
	From Part 4	on Schedule E/F,	copy the following:			10	otal Claim	
	9a. Domestic	support obligations	(Copy line 6a.)				\$0.00	
	9b. Taxes and	certain other debts	you owe the governmen	nt. (Copy line 6b.)			\$0.00	
	9c. Claims for	death or personal	njury while you were int	oxicated. (Copy line 6c.)			\$0.00	
	9d. Student loa	ans. (Copy line 6f.)					\$0.00	
		arising out of a seopy line 6g.)	paration agreement or o	divorce that you did not report as p	riority		\$0.00	
	9f. Debts to pe	ension or profit-sha	ring plans, and other si	milar debts. (Copy line 6h.)		+_	\$0.00	1
	9g. Total . Add	l lines 9a through 9	f.			_	\$0.00	

Fill in this information	to identify your case:			
Debtor 1	Linda	Jean	Harness	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:	E	astern District of Missouri	
Case number				
(if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did a second to many and a in NOT a	re ottomo v to holo v ov fill out hondowy to v formo?
Did you pay or agree to pay someone who is NOT at	n attorney to neip you till out bankruptcy forms?
√No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
X /s/ Linda Jean Harness Linda Jean Harness, Debtor 1	he summary and schedules filed with this declaration and that they are true and correct.
*	
Date 04/12/2021 MM/ DD/ YYYY	
MINI/ UU/ YYYY	

Fill in this information to	o identify your case:							
Debtor 1	Linda	Jean	Harness					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankru	ptcy Court for the:	E	astern District of I	Missouri				
Case number (if known)							Check if this is an amended filing	
Official Form	107							
Statement	of Financ	cial Affair	s for Indi	viduals Fili	ng for Bank	rup	tcy	04
				er, both are equally resp , write your name and ca				space
Part 1: Give Deta	ails About Your	Marital Status a	and Where You	Lived Before				
1 What is your curre	ent marital status?							

Married ✓ Not married 2. During the last 3 years, have you lived anywhere other than where you live now? **✓** No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 lived Dates Debtor 2 lived Debtor 1: Debtor 2: there ☐ Same as Debtor 1 ☐ Same as Debtor 1 From _ From _ Number Street Number Street City State ZIP Code City State ZIP Code ☐ Same as Debtor 1 ☐ Same as Debtor 1 Number Street Number Street City State ZIP Code City State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) **✓** No ☐ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Official Form 107

☐ No				
$ \mathbf{V} $ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income	Gross Income	Sources of income	Gross Income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
om January 1 of current year until the ate you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips	\$540.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		Operating a business	
or last calendar year: anuary 1 to December 31, 2020)	✓ Wages, commissions, bonuses, tips	\$8,745.00	☐ Wages, commissions, bonuses, tips	
yaridary 1 to December 01, <u>2020</u>	Operating a business		Operating a business	
1111				
•	₩ Wages, commissions, bonuses, tips	\$20,972.00	☐ Wages, commissions, bonuses, tips	
id you receive any other income during to ude income regardless of whether that incoments; pensions; rental income; interest; di	bonuses, tips Operating a business his year or the two previous of the ist taxable. Examples of othe vidends; money collected from	calendar years? ner income are alimony; child s	bonuses, tips Operating a business upport; Social Security, unen	
id you receive any other income during to the income regardless of whether that incoments; pensions; rental income; interest; die income that you received together, list it only no	bonuses, tips Operating a business his year or the two previous of the ist taxable. Examples of othe vidends; money collected from	calendar years? ner income are alimony; child s	bonuses, tips Operating a business upport; Social Security, unen	
lanuary 1 to December 31, 2019 YYYY lid you receive any other income during to the income regardless of whether that incoments; pensions; rental income; interest; die income that you received together, list it come that	bonuses, tips Operating a business his year or the two previous of the ist taxable. Examples of othe vidends; money collected from only once under Debtor 1.	calendar years? ner income are alimony; child s	bonuses, tips Operating a business upport; Social Security, unenling and lottery winnings. If you	
id you receive any other income during to the income regardless of whether that incoments; pensions; rental income; interest; die income that you received together, list it on the income that you received together.	bonuses, tips Operating a business his year or the two previous of the ist taxable. Examples of othe invidends; money collected from only once under Debtor 1.	calendar years? ser income are alimony; child so lawsuits; royalties; and gamble	bonuses, tips Operating a business upport; Social Security, unenling and lottery winnings. If your performance of the control of the contro	ou are filing a joint case and y
id you receive any other income during to the income regardless of whether that incoments; pensions; rental income; interest; die income that you received together, list it of the income that you received together.	bonuses, tips Operating a business his year or the two previous of the ist taxable. Examples of othe vidends; money collected from only once under Debtor 1.	calendar years? ner income are alimony; child s	bonuses, tips Operating a business upport; Social Security, unenling and lottery winnings. If you	
anuary 1 to December 31, 2019 YYYY Id you receive any other income during to take income regardless of whether that incoments; pensions; rental income; interest; die income that you received together, list it come that you received together that you received together, list it come that you received together that you received	bonuses, tips Operating a business his year or the two previous of the ist taxable. Examples of othe vidends; money collected from only once under Debtor 1. Debtor 1 Sources of income	calendar years? ner income are alimony; child s a lawsuits; royalties; and gamble Gross income from each source (before deductions and	bonuses, tips Operating a business upport; Social Security, unenling and lottery winnings. If you Debtor 2 Sources of income	Gross Income from eac source (before deductions and
d you receive any other income during to de income regardless of whether that incoments; pensions; rental income; interest; distincome that you received together, list it of No Yes. Fill in the details.	bonuses, tips Operating a business his year or the two previous of the ist taxable. Examples of othe ividends; money collected from only once under Debtor 1. Debtor 1 Sources of income Describe below. social security	Gross income from each source (before deductions and exclusions)	bonuses, tips Operating a business upport; Social Security, unenling and lottery winnings. If you Debtor 2 Sources of income	Gross Income from eac source (before deductions and
or the calendar year before that: January 1 to December 31, 2019 YYYY Joid you receive any other income during to ude income regardless of whether that incoments; pensions; rental income; interest; die income that you received together, list it of the income that you received together that you received together the income that you received to	bonuses, tips Operating a business his year or the two previous of the ist axable. Examples of othe vidends; money collected from only once under Debtor 1. Debtor 1 Sources of income Describe below.	calendar years? ner income are alimony; child s I lawsuits; royalties; and gamble Gross income from each source (before deductions and exclusions)	bonuses, tips Operating a business upport; Social Security, unenling and lottery winnings. If you Debtor 2 Sources of income	Gross Income from eac source (before deductions and

Debtor 1

Linda

Jean

Harness

Case number (if known) _

ebtor 1	<u>Linda</u>	Jear	1	Harness		_	Case r	number (if k	nown)
	First N	ame Mide	dle Name	Last Name					
Part 3: L	List Certa	in Payments Yo	ou Made B	Sefore You Filed	for Bankruptcy				
6. Are eith	ner Debtor 1's	s or Debtor 2's debt	s primarily o	consumer debts?					
☐No.				arily consumer debte or household purpose		re define	ed in 11 U.S.C.§	101(8) as "	ncurred by an
				kruptcy, did you pay a		\$6,825*	or more?		
	☐ No. Go	to line 7.							
	☐Yes.	creditor. Do not inc payments to an atto	lude paymer orney for this		ort obligations, such	as child	support and alim	nony. Also, (ount you paid that do not include
	* Subject t	o adjustment on 4/0	1/22 and eve	ery 3 years after that f	or cases filed on or a	ifter the c	late of adjustmer	nt.	
√ Yes.			-	arily consumer debt kruptcy, did you pay a		\$600 or i	more?		
	_	o to line 7.		1 3/ 3 1 3	•				
	Yes.	List below each cre	stic support	n you paid a total of \$ obligations, such as			, ,		
				Dates of payment	Total amount pa	id	Amount you st	till owe	Was this payment for
									Mortgage
	Creditor's Na	amo			-				☐ Car
	Creditor 5 No	airie							Credit card
	Number	Street							Loan repayment
									☐ Suppliers or vendors
									Other
	City	State	ZIP Code						
<i>Insider</i> s in officer, dire	nclude your re ector, person	elatives; any general in control, or owner	partners; re of 20% or m		l partners; partnersh curities; and any ma	ips of whanaging a	ich you are a ge agent, including o	neral partne	er; corporations of which you ar siness you operate as a sole
Yes.	List all paym	ents to an insider.							
				Dates of Toayment	Total amount paid	Amou	nt you still owe	Reason f	or this payment
Insider's	s Name								
Number	Street								
City		Ototo 710 0	odo.						
City		State ZIP C	ode						

		Last Name		_		n)
			nts or transfer any	property on account of	a debt that be	nefited an insider?
all payments that bene	efited an insider.					
			otal amount paid	Amount you still owe		• •
me						
Street						
State	ZIP Code					
	nai injury cases, sn	nali ciaims actions, di	vorces, collection s	uits, paternity actions, su	pport or custod	y modifications, and contra
	Nature	of the case	Cou	irt or agency		Status of the case
						Pending
			Court	Name		☐ On appeal☐ Concluded
er			Numb	per Street		Concluded
			City	State	e ZIP Code	
apply and fill in the det to line 11.	ails below.	any of your property	repossessed, for	eclosed, garnished, attad	ched, seized, o	r levied?
		Describe the	e property		Date	Value of the property
ame						_
Street		Explain wha	t happened			
		Property w	as repossessed.			
		Property w	ras repossessed. ras foreclosed. ras garnished.			
	ents on debts guarante t all payments that beneat the state State State State State Action Par before you filed for apply and fill in the det to line 11. In the information below	ents on debts guaranteed or cosigned by a stall payments that benefited an insider. Example 1 State	ents on debts guaranteed or cosigned by an insider. It all payments that benefited an insider. Dates of payment Street State ZIP Code State ZIP Code Partify Legal Actions, Repossessions, and Foreclose and before you filed for bankruptcy, were you a party in any land anatters, including personal injury cases, small claims actions, driving in the details. Nature of the case Per	ents on debts guaranteed or cosigned by an insider. It all payments that benefited an insider. Dates of payment Dates of payment Total amount paid payment Street State ZIP Code State ZIP Code State ZIP Code Partify Legal Actions, Repossessions, and Foreclosures Partify Legal Actions, Repossessions,	antify Legal Actions, Repossessions, and Foreclosures Street State ZIP Code State ZIP Code State ZIP Code State ZIP Code Amount you still owe payment Total amount paid Amount you still owe payment Street State ZIP Code Amount you still owe payment Street State ZIP Code Sta	ant tall payments that benefited an insider. Dates of payment

	Linda	Jean	Harness	Case number (if known)
	First Name	Middle Name	Last Name		
. Within 90 make a pa	days before you file yment because you d	d for bankruptcy, owed a debt?	did any creditor, including a bank or financ	ial institution, set off any amounts fro	om your accounts or refus
√ No					
Yes. Fill	in the details.				
			Describe the action the creditor took	Date action was	Amount
Craditaria N				taken	
Creditor's Na	ame				
Number	Street				
City	State	ZIP Code	Last 4 digits of account number: XXXX		
			Last 4 digits of account number. AAAA———		
			ras any of your property in the possession of	of an assignee for the benefit of cred	tors, a court-appointed
eceiver, a cu ✓ No	stodian, or another	official?			
_					
Yes					
art 5: Lis	t Certain Gifts a	nd Contribution	ons		
	ears before you filed	d for bankruptcy,	did you give any gifts with a total value of m	nore than \$600 per person?	
√No					
☐Yes. Fill	in the details for eac	h gift.			
Gifts with person	a total value of more	e than \$600 per	Describe the gifts	Dates you gave the gifts	Value
Person to W	Vhom You Gave the Git	ft			
Person to W	Vhom You Gave the Gi	ft			
Person to W	Vhom You Gave the Gi	ft			
	Vhom You Gave the Gi	ft			
		ft			
	Street	ft te ZIP Code			
Number	Street	te ZIP Code			
Number	Street	te ZIP Code			
Number City Person's rel	Street Star	te ZIP Code			
Number City Person's rel	Street Star	te ZIP Code	did you give any gifts or contributions with		/ charity?
Number City Person's rel	Street Star	te ZIP Code	lid you give any gifts or contributions with		/ charity?
Number City Person's rel 4. Within 2 y	Street Star	te ZIP Code			/ charity?
Number City Person's rel 4. Within 2 y	Street Star lationship to you	te ZIP Code			/ charity?

		Jean	Harness	Case number (if kn	, ————
	First Name	Middle	Name Last Name		
	contributions to char re than \$600	rities that	Describe what you contributed	Date you contributed	Value
harity's Na	ame				
umber	Street				
City	State Z	IP Code			
t 6: Lis	st Certain Losses	S			
Within 1	year before you filed	l for bankrı	uptcy or since you filed for bankruptcy, did you lose an	ything because of theft, fire, o	ther disaster, or gambling?
∑ No					
Yes. Fi	ill in the details.				
Describe	e the property you los	st and [Describe any insurance coverage for the loss	Date of your loss	Value of property lost
how the	loss occurred		nclude the amount that insurance has paid. List pending		
			nsurance claims on line 33 of Schedule A/B: Property.		
		ır	isulance dailins on line 33 of 3chedule Avb. Froperty.		
			isulance dains on line 33 of Schedule Arb. Property.		
			isulance dains on line 33 of <i>Schedule Alb. Property</i> .		
		ı I	isulance dains on line 33 of Schedule Arb. Property.		
** 7 : 1 is	st Cortain Payme				
rt 7: Lis	st Certain Payme				
		ents or T	ransfers	or transfer any property to an	yone you consulted about
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Within 1 king ban lude any a	year before you filed	ents or T I for bankru g a bankru	ransfers uptcy, did you or anyone else acting on your behalf payotcy petition?		yone you consulted about
Within 1 eking ban ude any a ☑No ☑Yes. Fi	year before you filed nkruptcy or preparing attorneys, bankruptcy ill in the details.	ents or T I for bankru g a bankru	ransfers uptcy, did you or anyone else acting on your behalf payotcy petition?	d in your bankruptcy. Date payment or	yone you consulted about Amount of payment
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Within 1 Sking ban Jude any a No Yes. Fil Heagler L Person Wh 901 Boone	year before you filed nkruptcy or preparing attorneys, bankruptcy ill in the details. Law Firm ho Was Paid les Lick 100	ents or T I for bankru g a bankru	ransfers uptcy, did you or anyone else acting on your behalf payotcy petition? eparers, or credit counseling agencies for services required Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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Within 1 Peking ban Peking ban Peking ban William West Fil Heagler L Person Wr 901 Boone Number Saint Cha City Email or w	year before you filed nkruptcy or preparing attorneys, bankruptcy fill in the details. Law Firm ho Was Paid les Lick 100 Street arles, MO 63301 State Z	ents or T	ransfers uptcy, did you or anyone else acting on your behalf payotcy petition? eparers, or credit counseling agencies for services required Description and value of any property transferred	Date payment or transfer was made	Amount of payment

or 1	Linda	Jean	Harness		Case number (if know	/n)
	First Name	Middle Name	Last Name			
				your behalf pay or t	ransfer any property to anyo	one who promised to help
		ce payments to your c sfer that you listed on li				
_	e any payment or train	siei tilat you listed on li	ne 10.			
No						
Yes. Fil	I in the details.					
		Description	n and value of any property	transferred	Date payment or	Amount of payment
					transfer was made	
erson Wh	o Was Paid					
umber	Street					
ty	State Z	IP Code				
					rty to anyone, other than pro	
√No						
Yes. Fil	I in the details.					
		Description	on and value of property		property or payments receive	ed Date transfer was
		transferre	d	or debts paid	in exchange	made
areon Wh	o Received Transfer					
SISOII WII	o Received Transier					
umber	Street					
ai11001	Ciroci					
ty	State Z	IP Code				
erson's re	elationship to you					
) years before you file asset-protection device		you transfer any property to	o a self-settled trust	or similar device of which ye	ou are a beneficiary?(Thes
1 No	,	,				
_						
Yes. Fil	I in the details.					
		Description	n and value of the property	transferred		Date transfer was
						made
iame of tr	ust					
ame UI II	uoi					

ebtor 1	Linda	Jean	Harness		Case number (if known)	
	First Name	Middle Name	Last Name			
Part 8: Lis	st Certain Financi	ial Accounts, Inst	ruments, Safe Depos	sit Boxes, and Storage	Units	
transferred? Include chec	? king, savings, money n		al accounts; certificates of d	instruments held in your name	-	
_	II in the details.					
		Last 4 dig	its of account number	Type of account or	Date account was	Last balance
				instrument	closed, sold, moved, or transferred	before closing or transfer
Name of Fi	nancial Institution	XXXX		Checking		
Number	Street			☐ Savings ☐ Money market		
				Brokerage		
				Other		
City	State ZIF	P Code				
	ll in the details.		e had access to it?	Describe the cor	ntents	Do you still have it?
Name of Fi	nancial Institution	Name				Yes
Number	Street	Number	Street			
		City	State ZIP Cod	de		
City	State ZIF	P Code				
√No	u stored property in a	storage unit or place	other than your home witl	hin 1 year before you filed fo	or bankruptcy?	
		Who else	e has or had access to it?	Describe the cor	ntents	Do you still have it?
Name of St	orage Facility	Name				□ No □ Yes
Number	Street	Number	Street			
		City	State ZIP Cod	de		
City	State ZIF	P Code				

	First Name	Jean Middle Name	Harness Last Name	Case number (if kn	own)
art 9: Id			ol for Someone Else		
3. Do you l √1 No	hold or control any p	roperty that someone	else owns? Include any	property you borrowed from, are storing for, or h	old in trust for someone.
☐Yes. F	ill in the details.				
		Where	is the property?	Describe the property	Value
Owner's N	ame	Number	Street		
Number	Street				
		City	State ZIP C	Code	
City	State Z	IP Code			
rt 10: (Give Details Ahor	ut Environmental	Information		
Site me includin Hazard contam	ng disposal sites. Sous material means ar inant, or similar term.	nything an environment	al law defines as a hazardo	al law, whether you now own, operate, or utilize it or one ous waste, hazardous substance, toxic substance, h	
			know about, regardless	of when they occurred. y liable under or in violation of an environmental	
	J	notified vou that vou n	nav be liable or potentially		law?
√ No		notified you that you n	nay be liable or potentially	,	law?
_	ill in the details.	ootified you that you n	nay be liable or potentiall	,	law?
_	ill in the details.		nay be liable or potentially	Environmental law, if you know it	law? Date of notice
☐Yes. F			nental unit		
☐Yes. F		Governm	nental unit		
Yes. F		Governm	nental unit		
Yes. F	ite	Governme	nental unit ntal unit		
_	ite Street	Governme Number	nental unit ntal unit Street		
Yes. F Name of si	ite Street	Governme Number	nental unit ntal unit Street		
Name of si	Street State Z	Governme Number City	nental unit ntal unit Street	Environmental law, if you know it	
Name of si Number City 5. Have yo	Street State Z	Governme Number City	nental unit ntal unit Street State ZIP Code	Environmental law, if you know it	
Name of si Number City 5. Have yo	Street State Z	Governme Number City	nental unit ntal unit Street State ZIP Code	Environmental law, if you know it	
Name of si Number City 5. Have yo	Street State Z	Governme Number City	nental unit ntal unit Street State ZIP Code	Environmental law, if you know it	
Name of si Number City 5. Have yo	Street State Z	Governme Number City	nental unit ntal unit Street State ZIP Code	Environmental law, if you know it	

EIN:	tor 1	Linda	Jean	Harness	C	ase number (if known) _	
Number Street Number Street Number Street		First Name	Middle N	Name Last Name			
Number Street Number Street City State ZIP Code				Governmental unit	Environmental law, if you	know it	Date of notice
City State ZIP Code Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. All No Ves. Fill in the details. Court or agency Nature of the case Status of the case Court Name Pending On appeal Concluded Numbor Street City State ZIP Code Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Ves. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	lame of site			Governmental unit	_		
City State ZIP Code Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Al No Yes, Fill in the details. Court or agency Nature of the case Status of the case Status of the case Court Name Number Street Number Street Within 4 years before you filled for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation Court Name Post of the above applies. Go to Part 12. Yes, Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:							
Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Nature of the case Status of the case Pending On appeal On appeal Concluded Concluded On appeal Concluded Concluded On appeal On a positive of a partnership On a papeal On appeal O	lumber S	Street		Number Street	_		
Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No				City State ZIP Code	_		
Court or agency Nature of the case Status of the case Court Name C	ity	State Z	IP Code				
Court or agency Nature of the case Court Name Court Na							
Yes. Fill in the details. Court or agency	_	oeen a party in any	/ judicial or a	dministrative proceeding under a	ny environmental law? Include s	ettlements and orders.	
Case number City State ZIP Code Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	_	n the details.					
Case number Case number City State ZIP Code City State ZIP Code Concluded Conclud				Court or agency	Nature of the case		Status of the case
Case number Case number City State ZIP Code City State ZIP Code Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:							
Number Street City State ZIP Code	Case title			Court Name	_		
Number Street City State ZIP Code Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Rame Name Name of accountant or bookkeeper Dates business existed From							
City State ZIP Code ### Title: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business			i	Number Street	_		Concluded
Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	Case number	•					
Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:			,	City State ZIP Code			
Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:							
Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:							
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation ☑ An owner of at least 5% of the voting or equity securities of a corporation ☑ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name EIN:	rt 11: Giv	e Details Abou	ut Your Bu	siness or Connections to A	ny Business		
A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation ✓ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name EIN:	. Within 4 ye	ears before you file	ed for bankru	ıptcy, did you own a business or I	nave any of the following connec	tions to any business?	
A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation ✓ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	☐ A so	ole proprietor or self	f-employed in	a trade, profession, or other activit	y, either full-time or part-time		
An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation ✓ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name EIN:	A me	ember of a limited l	liability compa	any (LLC) or limited liability partners	ship (LLP)		
□ An owner of at least 5% of the voting or equity securities of a corporation ☑ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Name Number Street Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	☐ A pa	artner in a partnersh	nip				
✓ No. None of the above applies. Go to Part 12. ☐ Yes. Check all that apply above and fill in the details below for each business. ☐ Describe the nature of the business ☐ Employer Identification number Do not include Social Security number or ITIN. ☐ EIN:	☐ An o	officer, director, or n	nanaging exe	cutive of a corporation			
Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	☐ An o	owner of at least 5%	6 of the voting	g or equity securities of a corporation	n		
Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN:	√ No. None	of the above applie	es. Go to Part	12.			
Name Do not include Social Security number or ITIN.	Yes. Chec	ck all that apply abo	ove and fill in	the details below for each business			
Number Street Name of accountant or bookkeeper Dates business existed FromTo				Describe the nature of the busi			
Number Street Name of accountant or bookkeeper Dates business existed FromTo	Name				Do not in	clude Social Security n	umber or ITIN.
Name of accountant or bookkeeper Dates business existed From To					EIN: _		
FromTo	Number S						
		Street					
Nitr. Chata 7ID Code		Street		Name of accountant or bookke	eper Dates bu	siness existed	
		Street		Name of accountant or bookke			

ebtor 1	Linda	Jean	Harness	Case number (if known)
	First Name	Middle Name	Last Name	
28. Within 2 or other pa		filed for bankruptcy, did y	you give a financial statement	to anyone about your business? Include all financial institutions, creditors,
✓No				
☐Yes. F	fill in the details belo	w.		
		Date iss	sued	
		MM / DD /	YYYY	
Number	Street			
City	State	ZIP Code		
Part 12: \$	Sign Below			
correct. I ur	nderstand that mak	ting a false statement, co	oncealing property, or obtainir	and I declare under penalty of perjury that the answers are true and ng money or property by fraud in connection with a bankruptcy case .C. §§ 152, 1341, 1519, and 3571.
	Linda Jean Harness ature of Linda Jean	Harness, Debtor 1		
Date	04/12/2021			
-	ach additional page	es to your Statement of I	Financial Affairs for Individua	els Filing for Bankruptcy (Official Form 107)?
√ No				
Yes				
Did you pay	y or agree to pay so	omeone who is not an att	torney to help you fill out bank	cruptcy forms?
✓No				
☐Yes. N	lame of person			Attach the Bankruptcy Petition Preparer's Notice, ———— Declaration, and Signature (Official Form 119).

E

6.

United States Bankruptcy Court Eastern District of Missouri

In re	F	Harness, Linda Je	ean				
					Case No.		
Debto	or				Chapter	13	<u></u>
			DISCLOSURE OF (COMPENSATION OF	ATTORNEY FO	R DEBTOR	
1.	that serv	compensation p	paid to me within one year	before the filing of the p	etition in bankru	ptcy, or agree	pove named debtor(s) and d to be paid to me, for with the bankruptcy case is as
	For	legal services, I	have agreed to accept				\$1,000.00
	Pric	or to the filing of	this statement I have rec	eived			\$0.00
	Bala	ance Due				····· <u> </u>	\$1,000.00
2.	The	source of the co	ompensation paid to me w	as:			
	4	Debtor	Other (specify)				
3.	The	source of compe	ensation to be paid to me	is:			
	J	Debtor	Other (specify)				
4.		I have not agree ny law firm.	ed to share the above-disc	closed compensation with	h any other perso	on unless they	are members and associate
	of m	=	o share the above-disclose py of the agreement, toge	•			e not members or associates he compensation, is
5.	In re	eturn for the abo	ve-disclosed fee, I have a	agreed to render legal se	ervice for all aspe	ects of the bar	kruptcy case, including:
	a.	Analysis of the bankruptcy;	debtor' s financial situation	on, and rendering advice	to the debtor in o	determining wl	hether to file a petition in
	b.	Preparation and	d filing of any petition, scl	hedules, statements of a	ffairs and plan w	hich may be r	equired;
	c.	Representation	of the debtor at the meet	ting of creditors and conf	irmation hearing,	and any adjo	urned hearings thereof;

By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/12/2021

/s/ Douglas Heagler

Date

Douglas Heagler
Signature of Attorney

Bar Number: 48952 Heagler Law Firm 901 Boones Lick 100 Saint Charles, MO 63301 Phone: (636) 278-2778

Heagler Law Firm

Name of law firm

Fill in this information to identify your case:					
Debtor 1	Linda	Jean	Harness		
	First Name	Middle Name	Last Name	_	
Debtor 2				_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Ea	astern District of Missouri	_	
Case number					
(if known)					

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
✓ 3. The commitment period is 3 years.
4. The commitment period is 5 years.
☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

te Your Avera	age Monthly Income
	te Your Avera

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and copayroll deductions).		\$0.00				
3.	Alimony and maintenance payments. Do not include payments		\$0.00				
4.	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.					\$216.67	
5.	Net income from operating a business, profession, or farm	Deb	tor 1	Debtor 2			
	Gross receipts (before all deductions)	_	\$0.00	\$0.0	0		
	Ordinary and necessary operating expenses		\$0.00	\$0.0	0		
	Net monthly income from a business, profession, or farm		\$0.00	\$0.0	Copy here	\$0.00	
6.	Net income from rental and other real property	Deb	tor 1	Debtor 2			
	Gross receipts (before all deductions)		\$0.00	\$0.0	0		
	Ordinary and necessary operating expenses		\$0.00	\$0.0	0		
	Net monthly income from rental or other real property		\$0.00	\$0.0	Copy here	\$0.00	

Deb	tor 1	Linda First Name	Jean Middle Name	Harness Last Name		Case n	umber (if known)	
		riist Name	Middle Name	Last Name		Column A Debtor 1	Column B Debtor 2 or non-filing spous	e
7.	Interest, divide	ends, and royalties				\$0.00		_
8.	Unemploymer	nt compensation				\$0.00		
	Do not enter the	e amount if you conten	d that the amount receive	d was a benefit under the So	cial			
	Security Act. In	stead, list it here:		↓				
	For you			\$319	9.33			
	For your sp	oouse						
	the Social Secu compensation, connection with uniformed servi include that pay	rity Act. Also, except a pension, pay, annuity, on a disability, combat-rices. If you received ar only to the extent that	as stated in the next sente or allowance paid by the U elated injury or disability, ny retired pay paid under o it does not exceed the am	ceived that was a benefit und ence, do not include any United States Government in or death of a member of the chapter 61 of title 10, then nount of retired pay to which y 10 other than chapter 61 of	/ou	\$0.00		
10.	include any be Federal law re Emergencies (COVID-19); p international of by the United sidisability, or de	enefits received under elating to the national e Act (50 U.S.C. 1601 e payments received as or domestic terrorism; o States Government in	the Social Security Act; pa emergency declared by the et seq.) with respect to the a victim of a war crime, a or compensation, pension connection with a disability are uniformed services. If r	e source and amount. Do no ayments made under the he President under the Nation e coronavirus disease 2019 crime against humanity, or n, pay, annuity, or allowance p ty, combat-related injury or lecessary, list other sources	nal paid			
	support from fa	mily members				\$0.00		
	Part time baby	sitting				\$180.00		
	Total amounts t	rom separate pages, i	fany					
	Total arribarito i	Tom soparate pages, i	i diriy.			\$396.67	T	= \$396.67
11.			hly income. Add lines 2 t nn A to the total for Colun			ψ590.07	+	= \$396.67
								Total average monthly income
Pai	rt 2: Determ	nine How to Mea	sure Your Deductio	ns from Income				·
12	Conv your to	tal average monthly i	ncome from line 11					\$396.67
						•••••		φ390.01
	_	marital adjustment.						
		narried. Fill in 0 below						
		ied and your spouse i ied and your spouse is	s filing with you. Fill in 0 b	elow.				
		• •	• .	hat was NOT regularly paid f	for the ho	usehold expenses of	VOU OF VOUR	
				ne spouse's support of some				
		fy the basis for excluding on a separate page.	ng this income and the an	nount of income devoted to e	each purp	ose. If necessary, list	additional	
	If this adjustn	nent does not apply, er	nter 0 below.					
					+			
	_					\$0.00		- \$0.00
	Total					Cop	by here. $ ightarrow$	φυ.υυ
14.	Your current	monthly income. Sub	otract the total in line 13 fr	rom line 12.				\$396.67

Debtor 1	<u>Linda</u>	Jean	Harness	Case number (if known)	
	First Name	Middle Name	Last Name		
15. Cal	culate your current month	ly income for the year. F	Follow these steps:		
15	a. Copy line 14 here →				\$396.67
	Multiply line 15a by 12 (th	ne number of months in a	year).		x 12
15	b. The result is your current	t monthly income for the	year for this part of the	9 form	\$4,760.04
16. Cal	culate the median family i	ncome that applies to ye	ou. Follow these steps	S:	
16	a. Fill in the state in which y	ou live.	_	Missouri	
16	b. Fill in the number of peop	ole in your household.	-	1	
16	c. Fill in the median family i	ncome for your state and	size of household		\$51,144.00
	To find a list of applicable instructions for this form.			link specified in the separate y clerk's office.	
17. Ho	w do the lines compare?				
17	fa.	n or equal to line 16c. Or Part 3. Do NOT fill out C	n the top of page 1 of the top of page 1 of the top of your Disp	nis form, check box 1, Disposable income is not determined un posable Income (Official Form 122C–2).	der 11 U.S.C. §
17	b. Line 15b is more th	an line 16c. On the top of	page 1 of this form, ch	neck box 2, <i>Disposable income is determined under 11 U.S.C.</i> Official Form 122C-2). On line 39 of that form, copy your current	
Part 3:	Calculate Your Com	nmitment Period Un	nder 11 U.S.C. §1	325(b)(4)	
18. Co	py your total average mon	thly income from line 11	1		\$396.67
19. Dec	duct the marital adjustme nmitment period under 11 U	nt if it applies. If you are .S.C. § 1325(b)(4) allows	married, your spouse you to deduct part of y	is not filing with you, and you contend that calculating the vour spouse's income, copy the amount from line 13.	
19a.	If the marital adjustment do	es not apply, fill in 0 on lin	ne 19a		- \$0.00
19b.	Subtract line 19a from line	e 18.			\$396.67
20. Cal	culate your current month	ly income for the year. F	Follow these steps.		
20a. (Copy line 19b				\$396.67
	Multiply by 12 (the number of				x 12
001 7					\$4,760.04
20b. ⊺	The result is your current mo	onthly income for the yea	r for this part of the for	m.	
20c. C	Copy the median family inco	ome for your state and siz	e of household from li	ne 16c	\$51,144.00
21. Ho	w do the lines compare?				
☑ ∟	ine 20b is less than line 20c The commitment period is 3 y	c. Unless otherwise order vears. Go to Part 4.	ed by the court, on the	top of page 1 of this form, check box 3,	
☐ L	, ,	al to line 20c. Unless oth		court, on the top of page 1 of this form,	
Part 4:	Sign Below				
By s	igning here, under penalty o	of perjury I declare that the	e information on this s	tatement and in any attachments is true and correct.	
	X /s/ Linda Jean Harne	ss			
	Signature of Debtor 1				
	Date 04/12/2021				
	MM/ DD/ YYYY				
If you	u checked 17a, do NOT fill o	out or file Form 122C–2.			
If you	u checked 17b, fill out Form	122C-2 and file it with th	is form. On line 39 of t	hat form, copy your current monthly income from line 14 above	

IN THE UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

IN RE: Ha	arness, Linda Jean		CASE NO
			CHAPTER 13
			VERIFICATION OF CREDITOR MATRIX
The abo	ove named Debtor h	ereby verifies that the	e attached list of creditors is true and correct to the best of his/her knowledge.
Date	04/12/2021	Signature	/s/ Linda Jean Harness Linda Jean Harness, Debtor

Ameren UE

Attn: Bankruptcy Po Box 66881

Saint Louis, MO 63166-6881

Comenity Bank/Avenue

Attn: Bankruptcy PO Box 182125 Columbus, OH 43218

Credence Resource Management, LLC 17000 Dallas Parkway Suite 204 Dallas, TX 75248

Heagler Law Firm

901 Boones Lick 100 Saint Charles, MO 63301

Select Portfolio Servicing, Inc

Attn: Bankruptcy PO Box 65250

Salt Lake City, UT 84165-0250

Spire

700 Market Street Saint Louis, MO 63103

US Bank/RMS CC

Attn: Bankruptcy PO Box 5229

Cincinnati, OH 45201-5229